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PTO/SB/50 (06-03)

Approved for use through 01/31/2004. OMB 0651-0033

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## REISSUE PATENT APPLICATION TRANSMITTAL

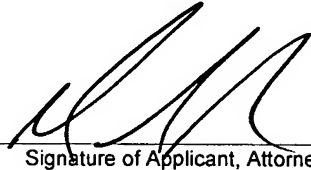
<b>Address to:</b> <b>Mail Stop Reissue</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>		<b>Attorney Docket No.</b> ACR0032-RE	
		<b>First Named Inventor</b> CHIH-FENG YEH	
		<b>Original Patent Number</b> 6,543,734 B2	
		<b>Original Patent Issue Date (Month/Day/Year)</b> April 8, 2003	
		<b>Express Mail Label No.</b>	
<b>APPLICATION FOR REISSUE OF:</b> (Check applicable) <input checked="" type="checkbox"/> <b>Utility Patent</b> <input type="checkbox"/> <b>Design Patent</b> <input type="checkbox"/> <b>Plant Patent</b>			
<b>APPLICATION ELEMENTS (37 CFR 1.173)</b>		<b>ACCOMPANYING APPLICATION PARTS</b>	
1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form (PTO/SB/56)</b> (Submit an original, and a duplicate for fee processing)		10. <input checked="" type="checkbox"/> <b>Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).</b>	
2. <input type="checkbox"/> <b>Applicant claims small entity status. See 37 CFR 1.27.</b>		11. <input type="checkbox"/> <b>Original Patent Grant</b>	
3. <input checked="" type="checkbox"/> <b>Specification and Claims in double column copy of patent format (amended, if appropriate)</b>		<input type="checkbox"/> <b>Ribboned Original Patent Grant</b>	
4. <input checked="" type="checkbox"/> <b>Drawing(s) (proposed amendments, if appropriate)</b>		<input type="checkbox"/> <b>Statement of Loss (PTO/SB/55)</b>	
5. <input checked="" type="checkbox"/> <b>Reissue Oath/Declaration (original or copy) (37 C.F.R. 1.175) (PTO/SB/51 or 52)</b>		12. <input checked="" type="checkbox"/> <b>Foreign Priority Claim (35 U.S.C. 119) (if applicable)</b>	
6. <input checked="" type="checkbox"/> <b>Power of Attorney</b>		13. <input checked="" type="checkbox"/> <b>Information Disclosure Statement (IDS)/PTO-1449</b> <input type="checkbox"/> <b>Copies of IDS Citations</b>	
7. <input checked="" type="checkbox"/> <b>Original U.S. Patent currently assigned</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> (If Yes, check applicable box(es))		14. <input type="checkbox"/> <b>English Translation of Reissue Oath/Declaration (if applicable)</b>	
<input checked="" type="checkbox"/> <b>Written Consent of all Assignees (PTO/SB/53)</b>		15. <input checked="" type="checkbox"/> <b>Preliminary Amendment</b>	
<input checked="" type="checkbox"/> <b>37 C.F.R. § 3.73(b) Statement (PTO/SB/96)</b>		16. <input type="checkbox"/> <b>Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</b>	
8. <input type="checkbox"/> <b>CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table</b>		17. <b>Other:</b> _____	
9. <b>Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)</b>			
a. <input type="checkbox"/> <b>Computer Readable Form (CFR)</b>			
b. <b>Specification Sequence Listing on:</b>			
i. <input type="checkbox"/> <b>CD-ROM (2 copies) or CD-R (2 copies); or</b>			
ii. <input type="checkbox"/> <b>paper</b>			
c. <input type="checkbox"/> <b>Statements verifying identity of above copies</b>			
<b>18. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> <b>Customer Number:</b> 28970 <b>OR</b> <input type="checkbox"/> <b>Correspondence address below</b>			
<b>Name</b>	Michael D. Bednarek		
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<b>NAME (Print/Type)</b>	Michael D. Bednarek	<b>Registration No. (Attorney/Agent)</b>	32,329
<b>Signature</b>		<b>Date</b>	March 4, 2004

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number <b>ACR0032-RE</b>		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 16	Total Claims (37 CFR 1.16(j))	(B) 16	**** 0 =	x \$ 9 =	\$0	or	x \$ 18 = \$0	
(C) 4	Independent claims (37 CFR 1.16(i))	(D) 4	* 0 =	x \$ 43 =	\$0		x \$ 86 = \$0	
Basic Fee (37 CFR					\$385			\$770
Total Filing Fee					\$385		\$770	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 23	MINUS	** 16	= 7	x \$ 9 =	\$63	x \$ 18 =	\$126
Independent Claims (37 CFR 1.16(i))	*** 7	MINUS	***** 4	= 3	x \$ 43 =	\$129	x \$ 86 =	\$258
Total Additional Fee						\$192	OR	\$384
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p>A duplicate copy of this sheet is _____.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>50-1390</u>.</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>1,154</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>March 4, 2004</p> <p>_____</p> <p>Date</p> <p>32,329</p> <p>_____</p> <p>Registration Number, if applicable</p> </div> <div style="width: 45%; text-align: center;">  <p>_____ Signature of Applicant, Attorney or Agent of Record</p> <p>Michael D. Bednarek</p> <p>_____ Typed or printed name</p> </div> </div>								

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

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 17513 U.S. PTO  
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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 425.00

## Complete if Known

Application Number Not Yet Assigned  
Filing Date February 11, 2004  
First Named Inventor BLUMBERG  
Examiner Name N/A  
Art Unit N/A  
Attorney Docket No. 60142-5003

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 50-0310  
Deposit Account Name Morgan, Lewis & Bockius

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	385.
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$) 385.00

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims 10 -20\*\* = 0 x 0 = 0  
Independent Claims 2 -3\*\* = 0 x 0 = 0  
Multiple Dependent 0 = 0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) 0.

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	40.00
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 40.00

## SUBMITTED BY

Name (Print/Type) Alison B. Weisberg Registration No. 45,206 Telephone 215-963-5091  
Signature [Signature] Date 2/11/04

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**POWER OF ATTORNEY**

Docket No

ACR0032-RE

Name of Applicant: **CHIH-FENG YEH**Address of Applicant: **No. 24, Lane 49, Chfeng St., Taipei 103, Taiwan, R.O.C.**Title: **FLAT PANEL DISPLAY APPARATUS AND MOUNTING APPARATUS THEREIN**Serial No. if Any: **Reissue Application of U.S. Patent 6,543,734 B2**Issued: **April 8, 2003**

\_\_\_\_\_ TO THE COMMISSIONER FOR PATENTS \_\_\_\_\_

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Honorable Sir:

I hereby appoint.

Lawrence J. Gotts - Reg. No. 31,163  
Michael D. Bednarek - Reg. No. 32,329  
Aslan Baghdadi - Reg. No. 34,542  
Elizabeth M. Roesel - Reg. No. 34,878  
David C. Isaacson - Reg. No. 38,500  
Steven P. Arnheim - Reg. No. 43,475  
Poh C. Chua - Reg. No. 44,615  
Michael A. Oblon - Reg. No. 42,956  
Lawrence D. Eisen - Reg. No. 41,009  
Michelle S. Marks, Reg. No. 41,971

Brett C. Martin, Reg. No. 52,000  
John Kasha, Reg. No. 53,100  
Joanne H. Kim, Reg. No. 51,193  
Chad D. Wells, Reg. No. 50,875  
Tara L. Hutchings, Reg. No.: 46,559

as principal attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

Please direct all future correspondence to

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By

Eric Ma  
Eric Ma, Associate Patent Director  
Patent Department/ Legal Division  
Wistron Corporation

Dated: 2-26-2004